

NOT FOR PUBLIC VIEW

FINANCIAL AFFIDAVIT					
(REDACTED) REQUEST FOR ATTORNEY FEES OR OTHER EXPENSES (REDACTED)					
IN UNITED STATES		<input type="checkbox"/> MAGISTRATE	<input type="checkbox"/> DISTRICT	<input type="checkbox"/> APPEALS COURT	<input type="checkbox"/> OTHER PANEL (SPECIFY)
IN THE CASE OF _____					
V.S. _____		FOR	AT	FILED	
PERSON REPRESENTED (Show your full name) <i>Guadalupe Valladares</i>					
CHARGE/OFFENSE (describe if applicable & check box →) <input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor					
1 <input type="checkbox"/> Defendant—Adult 2 <input checked="" type="checkbox"/> Defendant Juvenile 3 <input type="checkbox"/> Appellant 4 <input type="checkbox"/> Probation Violator 5 <input type="checkbox"/> Parole Violator BY <i>DEPUTY</i> JUDGE CLERK DEPUTY SOUTHERN DIVISION OF CALIFORNIA					
DOCKET NUMBERS Magistrate <i>LOS ANG 1674</i> District Court Court of Appeals					

EMPLOYMENT ASSETS {	Are you now employed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Am Self-Employed <i>HOUSEKEEPER</i>			
	Name and address of employer:			
	IF YES, how much do you earn per month? \$ <i>1000/mo</i>	IF NO, give month and year of last employment How much did you earn per month? \$		
	If married is your Spouse employed? <input type="checkbox"/> Yes <input type="checkbox"/> No	If a minor under age 21, what is your Parents or Guardian's approximate monthly income? \$		
OTHER INCOME CASH PROPERTY {	Have you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? <input type="checkbox"/> Yes <input type="checkbox"/> No			
	IF YES, GIVE THE AMOUNT RECEIVED & IDENTIFY THE SOURCES \$ <i>864</i>	SOURCES <i>WELFARE + STAMPS (450)</i>		
	Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
OBLIGATIONS & DEBTS {	IF YES, GIVE THE VALUE AND \$ DESCRIBE IT VALUE _____ DESCRIPTION _____			
	MARITAL STATUS <input checked="" type="checkbox"/> SINGLE <i>SEPARATED</i> <input type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input checked="" type="checkbox"/> SEPARATED OR DIVORCED	Total No. of Dependents <i>3</i>	List persons you actually support and your relationship to them <i>CESAR - 9 yr.</i> <i>JASMINE - 2 yr.</i> <i>JUANITA 12 yr.</i>	
DEBTS & MONTHLY BILLS (LIST ALL CREDITORS, INCLUDING BANKS, LOAN COMPANIES, CHARGE ACCOUNTS, ETC.)	APARTMENT OR HOME: <i>Rent</i> <i>Utilities</i> <i>Food</i> <i>Cell phone</i> <i>Diapers</i> <i>Clothes</i>	Creditors <i>Rent</i> <i>Utilities</i> <i>Food</i> <i>Cell phone</i> <i>Diapers</i> <i>Clothes</i>	Total Debt <i>\$ 875</i> <i>\$ 80</i> <i>\$ Food Stamps</i> <i>\$ 80</i> <i>\$ 20</i> <i>\$ 120 x 3 = 360</i>	Monthly Paymt. <i>\$ 875</i> <i>\$ 80</i> <i>\$ Food Stamps</i> <i>\$ 80</i> <i>\$ 20</i> <i>\$ 120 x 3 = 360</i>

I certify under penalty of perjury that the foregoing is true and correct. Executed on (date) *5/29/08*

SIGNATURE OF DEFENDANT
(OR PERSON REPRESENTED)

Guadalupe V. *11415*